

PART B - FEE(S) TRANSMITTAL

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7590 06/16/2006

CLIFFORD KRAFT
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08/14/2006 HVUONG2 00000016 10751552

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<i>CLIFFORD KRAFT</i>		(Depositor's name)
<i>Clifford Kraft</i>		(Signature)
<i>AUG. 8, 2006</i>		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/751,552	01/05/2004	Clifford Sweatte		2412

TITLE OF INVENTION: METHOD AND SYSTEM FOR FACILITY SECURITY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	09/18/2006
EXAMINER	ART UNIT		CLASS-SUBCLASS		

TWEEL JR, JOHN ALEXANDER 2612 340-573100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1 *CLIFFORD KRAFT*

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Authorized Signature

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Date

AUG. 8, 2006

Typed or printed name

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35,229

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